Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	<u> </u>
Case number (if known)	Chapter you are filing under:
	✓ Chapter 7
	Chapter 11 Chapter 12
	Chapter 13

#### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself	F	
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name	Miranda	
	First name	First name
Write the name that is on	N.	
your government-issued picture identification (for	Middle name	Middle name
example, your driver's	Slotowski	
license or passport	Last name	Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the	First name	First name
last 8 years	NAC della company	Middle
Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your	XXX - XX- 1254	xxx - xx-
Social Security number or federal	OR	OR
Individual Taxpayer Identification	9 xx - xx-	9 xx - xx-
number (ITIN)		

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About Debtor 1:  About Debtor 2 (Spouse Only in a Joint Companies of EINs.)  About Debtor 2 (Spouse Only in a Joint Companies of EINs.)  About Debtor 2 (Spouse Only in a Joint Companies of EINs.)  I have not used any business names or EINs.  Business name  Business name  Business name  EIN  EIN  EIN  5. Where you live  661 N. Main St Number Street Apt 5  Antioch Illinois 60002  City State Zip Code  About Debtor 2 (Spouse Only in a Joint Companies of EINs.)  Business names or EINs.  Business name  I have not used any business names or EINs.  Business name  Business name  If Debtor 2 lives at a different address:  Number Street  Number Street  City State Zip Code  City State Zip Code	
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names  EIN  EIN  5. Where you live  661 N. Main St Number Street Apt 5  Antioch Illinois 60002	
and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names  EIN  EIN  EIN  FIN  Business name  Business name  Business name  Business name  Business name  FIN  EIN  FIN  FIN  If Debtor 2 lives at a different address:  Number Street  Apt 5  Antioch Illinois 60002	ase):
Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names  EIN  EIN  5. Where you live  661 N. Main St Number Street Apt 5  Antioch Illinois 60002  Business name	
Include trade names and doing business as names  EIN  EIN  EIN  5. Where you live  661 N. Main St Number Street Apt 5  Antioch Illinois 60002	
doing business as names  EIN  EIN  5. Where you live  661 N. Main St Number Street Apt 5  Antioch Illinois 60002	
5. Where you live  661 N. Main St  Number Street  Apt 5  Antioch Illinois 60002	
661 N. Main St  Number Street  Apt 5  Antioch Illinois 60002	
Number Street Apt 5  Antioch Illinois 60002	
Antioch Illinois 60002	
Lake County County	
·	
If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at	
fill it in here. Note that the court will send any notices to you at this mailing address.  in here. Note that the court will send any notices to this address.	nailing
Number Street Number Street	
City State Zip Code City State Zip Code	
6. Why you are Check one: Check one:	
district to file for bankruptcy  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	
I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	
11 ave a lottlet reason. Explain. (Gee 26 6.6.6. 33 1466.)	400.)

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Debtor 1 Miranda First Name	N. Slotowski Case number (if known)  Middle Name Last Name	
	pout Your Bankruptcy Case	
7. The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankrupto B2010)). Also, go to the top of page 1 and check the appropriate box.  Chapter 7 Chapter 11 Chapter 12 Chapter 13	;y (Form
8. How you will pay the fee	<ul> <li>I will pay the entire fee when I file my petition. Please check with the clerk's office in your court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order If your attorney is submitting your pay on your behalf, your attorney may pay with a credit card or check with a pre-printed address.</li> <li>I need to pay the fee in installments. If you choose this option, sign and attach the Applicate Individuals to Pay Your Filing Fee in Installments (Official Form 103A).</li> <li>I request that my fee be waived (You may request this option only if you are filing for Chapter By law, a judge may, but is not required to, waive your fee, and may do so only if your incompless than 150% of the official poverty line that applies to your family size and you are unable the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.</li> </ul>	you yment  tion for  ter 7. ne is to pay
9. Have you filed for bankruptcy within the last 8 years?	✓ No.     Yes. District When MM / DD / YYYY     Case number MM / DD / YYYYY     District When MM / DD / YYYYY     Case number MM / DD / YYYYY	
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	✓ No.         Yes. Debtor       Relationship to you         District       When MM / DD / YYYY         Debtor       Relationship to you         District       When MM / DD / YYYY         Case number, if known MM / DD / YYYYY	
11. Do you rent your residence?	<ul> <li>No. Go to line 12.</li> <li>✓ Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?</li> <li>✓ No. Go to line 12.</li> <li>☐ Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this bankruptcy petition.</li> </ul>	

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Debtor 1 Miranda		N.	dla Nama	Slotowski	Case number (if k	known)	
Part 3: Report About Any	v Rus		dle Name PS You Own as	Last Name	or		
12. Are you a sole proprietor of any full- or part-time business?  A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.  If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.		No.	Go to Part 4.  Name and location  Name of business  Number  City  Check the appro  Health Ca  Single Ass  Stockbrok	on of business as, if any  Street  Opriate box to describe yeare Business (as defined set Real Estate (as defixer (as defined in 11 U.S.) atty Broker (as defined in	State  **rour business:* d in 11 U.S.C. § 101(27A)) ned in 11 U.S.C. § 101(51E .C. § 101(53A))	Zip Code	
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?  For a definition of small business debtor, see 11 U.S.C. § 101(51D).	dead opera	llines. If y ations, ca C. § 11 1 No.	ou indicate that you ash-flow statement (6(1)(B).  I am not filing und I am filing under (Bankruptcy Code	ou are a small business of t, and federal income tax der Chapter 11. Chapter 11, but I am NO	DT a small business debtor	most recent balar ocuments do not e.	nce sheet, statement of exist, follow the procedure in 11
Part 4: Report if You Ow	n or l	Have A	Any Hazardou	s Property or Any	Property That Need	ls Immediate	Attention
14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate		No. Yes.	What is the hazard	d? ion is needed, why is it r			
attention?  For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent				City	State		Zip Code
repairs?							

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Debtor 1 Miranda N. Slotowski Case number (if known)

#### First Name Middle Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried internet, even after I reasonably tried to do so. to do so. Active duty. Active duty. I am currently on active military duty in I am currently on active military duty in a military combat zone. a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of about credit counseling, you must file a motion for waiver of

credit counseling with the court.

credit counseling with the court.

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Debtor 1 Miranda		Slotowski Case number (if kr	nown)			
Part 6: Answer These Qu	Middle Name uestions for Reporting Purpo	Last Name SeS				
16. What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. §  101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  No. Go to line 16b.  ✓ Yes. Go to line 17.  16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  No. Go to line 16c.  Yes. Go to line 17.  16c. State the type of debts you owe that are not consumer debts or business debts.					
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	paid that funds will be avail.  No. Yes.		ly is excluded and administrative expenses are			
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000			
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
Part 7: Sign Below						
For you	and correct.  If I have chosen to file under 11,12, or 13 of title 11, United choose to proceed under Chap If no attorney represents me ame fill out this document, I had I request relief in accordance I understand making a false s	Chapter 7, I am aware that I may prostates Code. I understand the relief oter 7.  and I did not pay or agree to pay sor we obtained and read the notice required with the chapter of title 11, United Statement, concealing property, or obcase can result in fines up to \$250,052, 1341, 1519, and 3571.	f available under each chapter, and I meone who is not an attorney to help uired by 11 U.S.C. § 342(b). Itates Code, specified in this petition. Itational property by fraud in 2000, or imprisonment for up to 20			

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Debtor 1	Miranda	N.	Slotowski	Case number (	(if known)
	First Name	Middle Name	Last Name		
you are by one If you repres	ur attorney, if e represented are not ented by an ey, you do not	eligibility to proceed ur the relief available und to the debtor(s) the no	nder Chapter 7, 11, 12 der each chapter for v tice required by 11 U.	2, or 13 of title 11, U which the person is e S.C. § 342(b) and, in	hat I have informed the debtor(s) about inited States Code, and have explained eligible. I also certify that I have delivered in a case in which § 707(b)(4)(D) applies, ation in the schedules filed with the
	o file this page.	/s/ Nathan Delman Signature of Attorney	for Debtor	Date	9/28/2016 MM / DD / YYYY
		Nathan Delman Printed name  Semrad Law Firm Firm name  5101 Washington Street Unit 29	eet		
		Gurnee City		Illinois State	60031 Zip Code
		Contact phone	3124473700	Email address	ndelman@semradlaw.com
		6296205		Illino	
		Bar number		State	E

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Fill in this information to identify your case:						
Debtor 1	Miranda	N.	Slotowski			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing	First Name	Middle Name	Last Name			
United States B	ankruptcy Court for the:	Northern	District of Illinois(State)			
Case number (If known)			(State)			

Check if this is ar
amended filing

12/15

#### Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	<b>Your assets</b> Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$19,275.00
1c. Copy line 63, Total of all property on Schedule A/B	\$19,275.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
<ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D</li> </ol>	\$21,327.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$10,913.00
Your total liabilities	\$32,240.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I	\$3,422.16
Schedule J: Your Expenses (Official Form 106J)  Copy your monthly expenses from line 22, Column A, of Schedule J	\$3,415.00

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Deb	tor 1	Miranda	N.	Slotowski	Case n	number (if known)		
		First Name	Middle Name	Last Name	_			
Part	4:	Answer These Questic	ons for Administr	rative and Statistical Re	ecords			
6. <b>A</b> ı	re yo	u filing for bankruptcy unde	er Chapters 7, 11, or	13?				
	N	o. You have nothing to report	on this part of the form.	. Check this box and submit this	s form to the co	ourt with your other schedule	es.	
Ŀ	Z Y	es.						
7. <b>W</b>	hat l	kind of debt do you have?						
[	_			mer debts are those incurred by out lines 8-10 for statistical pur				
		our debts are not primarily is form to the court with your o		u have nothing to report on this	part of the form	n. Check this box and subm	it	
		the Statement of Your Cu 122A-1 Line 11; OR, Form 12	•	ne: Copy your total current mor 122C-1 Line 14.	athly income fro	om Official	\$3,936.42	
9.	Сор	by the following special cate	egories of claims fro	m Part 4, line 6 of Schedule	E/F:			
	From Part 4 on Schedule E/F, copy the following:					Total claim		
	9a. I	Domestic support obligations	(Copy line 6a.)			\$0.00		
	9b	Taxes and certain other debts y	ou owe the governme	ent. (Copy line 6b.)		\$0.00		
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00								
	9d. \$	Student loans. (Copy line 6f.)			\$0.00			
		9e. Obligations arising out of a separation agreement or divorce that you did not report as				\$0.00		
	prio	rity claims. (Copy line 6g.)						
	9f. D	Debts to pension or profit-shar	ing plans, and other si	imilar debts. (Copy line 6h.)		\$0.00		
	9a. '	<b>Total.</b> Add lines 9a through 9f	:		,	\$0.00		

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Fill in this	information to identify your cas	e:				
Debtor 1	Miranda	N.	Slotowski			
	First Name	Middle N	lame Last Name	е		
Debtor 2 (Spouse,	if filing) First Name	Middle N	lame Last Name	<u> </u>		
United St	ates Bankruptcy Court for the:	Northern	District of Illinois (State			
Case nur (If known)			(State			
Officia	al Form 106A/B					Check if this is an amended filing
Sche	dule A/B: Prope	erty				12/1
category responsik write your Part 1:	ategory, separately list and de where you think it fits best. B ble for supplying correct info name and case number (if k Describe Each Resider u own or have any legal or ed	e as complete and rmation. If more s nown). Answer eve nce, Building, l	d accurate as possible. If t pace is needed, attach a ery question. Land, or Other Real I	two married people ar separate sheet to this Estate You Own o	e filing together, both are form. On the top of any a or Have an Interest In	equally dditional pages,
	No. Go to Part 2 Yes. Where is the property?					
1.1	Street address, if available, or other description		What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative	the amount of any secure Creditors Who Have Cla Current value of the	laims or exemptions. Put ed claims on Schedule D: aims Secured by Property. Current value of the	
	Number Street		Manufactured or mobile	e home	entire property?	portion you own?
	City State	Zip Code	Investment property Timeshare Other		Describe the nature of interest (such as fee si the entireties, or a life	mple, tenancy by
	Oily State	Zip Code	Who has an interest in tone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debt	only	Check if this is co (see instructions)	mmunity property
			Other information you w property identification n	rish to add about this number:	item, such as local	
If you	own or have more than one, list  Street address, if available, or		What is the property? C Single-family home Duplex or multi-unit bu Condominium or coope Manufactured or mobile	uilding erative	the amount of any secure	laims or exemptions. Put ed claims on Schedule D: aims Secured by Property.  Current value of the portion you own?
	Number Street  City State	Zip Code	Land Investment property Timeshare Other		Describe the nature of interest (such as fee si the entireties, or a life	mple, tenancy by
		·	Who has an interest in tone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2		Check if this is co (see instructions)	mmunity property

At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

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Debtor 1	Miranda First Name	N. Middle Name	Slotowski Last Name	Case number	(if known)	
1.3Stre	et address, if available, or otl		Inat is the property? Check all that app Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	oly.	Do not deduct secured of the amount of any secure Creditors Who Have Clas  Current value of the entire property?	·
Nun City		Zip Code	Investment property Timeshare Other		Describe the nature of interest (such as fee sit the entireties, or a life of the entireties).	mple, tenancy by
			The has an interest in the property? On Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another ther information you wish to add abo		Check if this is cor (see instructions)	nmunity property
		tion you own for al	roperty identification number: Il of your entries from Part 1, includin			
<b>Do you ov</b> you own th	at someone else drives. If you ins, trucks, tractors, sport utili	<b>equitable interest in</b> u lease a vehicle, also	a any vehicles, whether they are regist o report it on Schedule G: Executory Cont cles			
3.1		Ford Escape 2002 120000	Who has an interest in the propert one.  Debtor 1 only	ty? Check		laims or exemptions. Put ad claims on Schedule D: hims Secured by Property.
	Other information:	120000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and and ☐ Check if this is community proinstructions)		Current value of the entire property? \$2000.00	Current value of the portion you own? \$1000.00
3.2	Make Model: Year: Approximate mileage:	Dodge           Avenger           2013           69000	Who has an interest in the propert one.  Debtor 1 only  Debtor 2 only	t <b>y?</b> Check	Do not deduct secured of the amount of any secure Creditors Who Have Cla Current value of the	
	Other information:		Debtor 1 and Debtor 2 only  At least one of the debtors and and  Check if this is community propinstructions)		entire property? \$9725.00	portion you own? \$9725.00

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Debtor 1	Miranda	N.	Slotowski	Case numbe	r (if known)		
	First Name	Middle Name	Last Name		<b>D</b>		
3.3	Make		Who has an interest in the p	roperty? Check	Do not deduct secured claims or exemptions. F the amount of any secured claims on <i>Schedule</i>		
	Model: Year:		one.  Debtor 1 only			Claims Secured by Property.	
	Approximate mileage:				Cicators Willottave	sianno occarca by 1 reporty.	
			Debtor 2 only		Current value of the		
	Other information:		Debtor 1 and Debtor 2 only		entire property?	portion you own?	
			At least one of the debtors a				
			Check if this is communit instructions)	ty property (see			
3.4	Make		Who has an interest in the p	roperty? Check	Do not deduct secured	d claims or exemptions. Put	
	Model:		one.		the amount of any sec	ured claims on Schedule D:	
	Year:		Debtor 1 only		Creditors Who Have	Claims Secured by Property.	
	Approximate mileage:		Debtor 2 only		Current value of the	Current value of the	
	Other information:		Debtor 1 and Debtor 2 only		entire property?	portion you own?	
			At least one of the debtors a	nd another		<del></del>	
			Check if this is communit instructions)	ty property (see			
4.1	Make Model:		Who has an interest in the prone.	roperty? Check		d claims or exemptions. Put ured claims on Schedule D:	
	Year:		Debtor 1 only			Claims Secured by Property.	
	Approximate mileage:		Debtor 2 only		Current value of the	Current value of the	
	Other information:		Debtor 1 and Debtor 2 only		entire property?	portion you own?	
			At least one of the debtors a	nd another		<u> </u>	
			Check if this is communit				
			instructions)	ly property (see			
4.2	Make		Who has an interest in the p	roperty? Check	Do not deduct secured	d claims or exemptions. Put	
	Model:		one.		•	ured claims on Schedule D:	
	Year:		Debtor 1 only		Creditors Who Have	Claims Secured by Property.	
	Approximate mileage:		Debtor 2 only		Current value of the	Current value of the	
	Other information:		Debtor 1 and Debtor 2 only		entire property?	portion you own?	
			At least one of the debtors a	nd another		<del></del>	
			Check if this is communit instructions)	ty property (see			
5. Add	the dollar value of the no	rtion you own for all	of your entries from Part 2, inc	cluding any entrie	s for pages		
	•	•	or your critics from r are 2, inc	• •		10725.00	

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Debtor 1 Miranda Slotowski Case number (if known) First Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used Furniture \$750.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... x2 televisions; x1 tablet \$300.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles **√** No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments **√** No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment **√** No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ✓ Yes. Describe... **Used Clothing** \$350.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No ✓ Yes. Describe... \$800.00 13. Non-farm animals Examples: Dogs, cats, birds, horses **✓** No Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **√** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here .....

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Debto	or 1 Miranda	N.	Slotowski	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 4	Describ	e Your Financial Assets			
Do y	ou own or	have any legal or equitable int	erest in any of the fo	ollowing?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
16. <b>C</b>	ash				
E	kamples: Mone No	y you have in your wallet, in your home, in a	safe deposit box, and on har	nd when you file your petition	
	Yes			Cash:	
		noney ecking, savings, or other financial accounts similar institutions. If you have multiple acco		res in credit unions, brokerage houses,	
	<ul><li>No</li><li>✓ Yes</li></ul>		Institution name:		
		17.1. Checking account:	US Bank		\$250.00
		17.2. Checking account:			<u> </u>
		17.3. Savings account:			
		17.4. Savings account:			
		17.5. Certificates of deposit:			
		17.6. Other financial account:			
		17.7. Other financial account:			
		17.8. Other financial account:			
		17.9. Other financial account:			
		al funds, or publicly traded stocks nd funds, investment accounts with brokerag Institution or issuer name:	e firms, money market accor	unts	
		traded stock and interests in incorpora nership, and joint venture	ted and unincorporated	businesses, including an interest in	
	Yes. Give informatio them			% of ownership:	

Official Form 106A/B Schedule A/B: Property page 5

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Debt		Miranda	N.	Slotowski	Case number (if known)	
	F	First Name	Middle Name	Last Name		
	Negot Non-n	tiable instruments in	orate bonds and other negotia clude personal checks, cashiers' nts are those you cannot transfer	checks, promissory notes, a	and money orders.	
	in	es. Give specific of the formation about nem	Issuer name:			
	Exam			, thrift savings accounts, or	other pension or profit-sharing plans	
		lo 'es. List each	Type of account:	Institution name:		
	a	ccount	401(k) or similar plan:	Chase		\$100.00
	S	eparately.	Pension plan:			
			IRA:			
			Retirement account:			
			Keogh:			
			Additional account:			
			Additional account:			<del>-</del>
	Your s Exam		orepayments leposits you have made so that yo with landlords, prepaid rent, public	utilities (electric, gas, wate		
	=	No ,		Institution name:		
	▼ Y	'es	Electric:			
			Gas:			_
			Heating oil:			
			Security deposit on rental unit:	Chicago Asset Managem	ent	\$1000.00
			Prepaid rent:			_
			Telephone:			
			Water:			-
			Rented furniture:			
			Other:			_
23.		<b>rities</b> (A contract for No	a periodic payment of money to y  Issuer name and description:	ou, either for life or for a nur	nber of years)	
	∐ Y	′es	issuei riaine and description.			

Official Form 106A/B Schedule A/B: Property page 6

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Debt	or 1 Miranda N. First Name Middle	Slotowski e Name Last Name	Case number (if known)	
24.	Interests in an education IRA, in an ac	count in a qualified ABLE program, or unde	er a qualified state tuition program	•
	26 U.S.C. §§ 530(b)(1), 529A(b), and 529	(D)(1).		
	✓ No Institution name and descri	ption. Separately file the records of any interests	.11 U.S.C. § 521(c):	
	_			
	-			
25.	Trusts, equitable or future interests in exercisable for your benefit	property (other than anything listed in line	1), and rights or powers	
	✓ No			7
	Yes. Describe			_
26.		esecrets, and other intellectual property es, proceeds from royalties and licensing agreen	nonte	
	No	es, proceeds from royalities and licensing agreen	Herits	
	Yes. Describe			
27.	Licenses, franchises, and other general Examples: Building permits, exclusive lice	al intangibles nses, cooperative association holdings, liquor li	censes, professional licenses	
	✓ No			7
	Yes. Describe			
B. 4				Occurred to alone of the
Mor	ney or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	ney or property owed to you?  Tax refunds owed to you			portion you own?
				portion you own? Do not deduct secured
	Tax refunds owed to you  ✓ No  ✓ Yes. Give specific information			portion you own? Do not deduct secured
	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whether you already filed the returns			portion you own?  Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whether you already filed the returns and the tax years		Federal:	portion you own?  Do not deduct secured claims or exemptions.  \$0.00
28.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whether you already filed the returns and the tax years	spousal support, child support, maintenance, divo	Federal: State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00
28.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whether you already filed the returns and the tax years	pousal support, child support, maintenance, divo	Federal: State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00
28.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whether you already filed the returns and the tax years  Family support Examples: Past due or lump sum alimony, s	pousal support, child support, maintenance, divo	Federal: State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00
28.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whether you already filed the returns and the tax years		Federal: State: Local: broce settlement, property settlement	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whether you already filed the returns and the tax years		Federal: State: Local: broce settlement, property settlement Alimony:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 \$5000.00
28.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whether you already filed the returns and the tax years		Federal: State: Local:  Droce settlement, property settlement  Alimony: Maintenance:	\$0.00 \$0.00 \$5000.00 \$5000.00
28.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whether you already filed the returns and the tax years  Family support Examples: Past due or lump sum alimony, s  No ✓ Yes. Give specific information		Federal: State: Local:  Drice settlement, property settlement  Alimony: Maintenance: Support:	\$0.00 \$0.00 \$5000.00 \$0.00 \$0.00
28.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whether you already filed the returns and the tax years  Family support Examples: Past due or lump sum alimony, s  No  Yes. Give specific information	Child Support Arrears  acce payments, disability benefits, sick pay, vacation	Federal: State: Local:  Orce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whether you already filed the returns and the tax years  Family support Examples: Past due or lump sum alimony, s  No ✓ Yes. Give specific information  Other amounts someone owes you Examples: Unpaid wages, disability insuran Social Security benefits; unpaid	Child Support Arrears	Federal: State: Local:  Orce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you  ✓ No  Yes. Give specific information about them, including whether you already filed the returns and the tax years  Family support Examples: Past due or lump sum alimony, s  No  Yes. Give specific information	Child Support Arrears  acce payments, disability benefits, sick pay, vacation	Federal: State: Local:  Orce settlement, property settlement  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	otor 1 Miranda	N.	Slotowski	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance pol Examples: Health, disability,		ngs account (HSA); credit, h	omeowner's, or renter's insurance	
	<b>✓</b> No				
	=	Comp	any name:	Beneficiary:	Surrender or refund value:
	Yes. Name the insurance				
	of each policy and list its	s value			
32.	Any interest in property the lif you are the beneficiary of a property because someone life.	a living trust, expect proceeds		or are currently entitled to receive	
	✓ No				
	Yes. Describe				
20	Claims anainst thind monti		a filad a lawawit an mada a	damand for normant	
33.		es, whether or not you hav syment disputes, insurance cl		demand for payment	
	Examples. Accidents, empic	lyment disputes, insurance di	aims, or rights to sue		
	✓ No				
	Yes. Describe				
34.	Other contingent and unl	iquidated claims of every	nature, including countere	laims of the debtor and rights	
	to set off claims				
	✓ No				
	_				
	Yes. Describe				
25	Any financial accets you	lid not already list			
35.	Any financial assets you d	ild not aiready list			
	<b>✓</b> No				
	Yes. Describe				
		<u></u>			
36.	Add the dollar value of all	-			\$6350.00
	for Part 4. Write that numl	ber here		<b>&gt;</b>	
Par	5 Describe Any Bus	siness-Related Proper	ty You Own or Have a	n Interest In. List any real estate	in Part 1.
	Do you own or have any l		-		
37.	Do you own or have any i	egai or equitable interest ii	i any business-relateu pro		
	✓ No. Go to Part 6.				current value of the ortion you own?
	Yes. Go to line 38.				On not deduct secured claims
					r exemptions
38	Accounts receivable or co	mmissions vou already ea	rned	-	,
36.	Accounts receivable or co	oninissions you alleady ea	nieu		
	<b>✓</b> No				
	Yes. Describe				
39.	Office equipment, furnish	nings, and supplies			
			ns, printers, copiers, fax mac	hines, rugs, telephones, desks, chairs, electro	nic devices
			• ·		
	✓ No				
	Yes. Describe				

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Debt	tor 1	Miranda	N.	Slotowski	Case number (if known)	
40.	Mad	First Name Chinery, fixtures, eq	Middle Name Juipment, supplies vou u	Last Name Ise in business, and tools of you	ır trade	
		No	,р, саррс. уса с			
	Ħ	Yes. Describe				
	_					
41.	Inve	entory				
	<b>V</b>	No				
	百	Yes. Describe				
	_					
			ips or joint ventures			
	<b>✓</b>	No		Name of autitus	0/ of our archine	
		Yes. Give specific		Name of entity:	% of ownership:	
		information about them				_
					<del></del>	
						_
43. (	_		lists, or other compilati	ons		
		No Vee Do your lists in	clude personally identifiab	le information (as defined in 11 U.S	C 8 101/414\)2	
	ш		ciade personally lacritilas	ic information (as defined in 11 o.c.	.0. § 101(4174)):	
		☐ No ☐ Yes. Descr	ribo			
		_				
44.	_	_	property you did not alre	ady list		
	뇓	No				
	ш	Yes. Give specific information				
			-	art 5, including any entries for pa		
for Pa						
Part	6:	Describe Any F If you own or have ar	Farm- and Commeron interest in farmland, list it	ial Fishing-Related Prope in Part 1.	rty You Own or Have an Interest	In.
46.	Do	you own or have a	ny legal or equitable into	erest in any farm- or commercial	fishing-related property?	
	V	No. Go to Part 7.				Current value of the portion you own?
	Ш	Yes. Go to line 47.				Do not deduct secured claims
						or exemptions
47.		m animals	ultry, farm-raised fish			
	-		, raiiii raiood nori			
		No Yes. Describe				
	_					

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Debt	or 1	Miranda First Name	N. Middle Name	Slotowski Last Name	Case number (if known)	
48.	Cro	ps-either growing o		Lastivallie		
	_	No				
	H	Yes. Describe				
	_	Too. Docoribo				
40	- -	m and fishing again		now, five, was and tools of trade		
49.	_		ment, implements, machli	nery, fixtures, and tools of trade		
	뇓	No				
	Ш	Yes. Describe				
	-				·	
50.	Far	m and fishing suppli	ies, chemicals, and feed			
	<b>✓</b>	No				
		Yes. Describe				
	-					
51.	Any	farm- and commerc	cial fishing-related propert	y you did not already list		
	<b>✓</b>	No				
		Yes. Describe				
				i, including any entries for pages		
		Trito triat riambor r				
Part	7:	Describe All Pro	perty You Own or Ha	ve an Interest in That You [	Did Not List Above	
			erty of any kind you did no			
	_	mples: Season tickets,	, country club membership			
	✓	No				
		Yes. Give specific				
		information				
- 4 A	ـا 4 اـ اـ		of consumeration from Bout 7	/ Natrice that mount on home	_	
54. A	aa tn	ie dollar value of all	of your entries from Part /	. Write that number here	······································	
5 1		Lierabe Terele e	ffeet Benjafikie Fe			
Part	8:	LIST the lotals o	of Each Part of this Fo	orm		
55. <b>F</b>	art 1	l: Total real estate, li	ne 2		<b>&gt;</b>	
			_			
56. <b>p</b>	art 2	total vehicles, line	5	\$10725.00	-	
57. <b>P</b>	art 3	: Total personal and	I household items, line 15	\$2200.00	_	
58. <b>P</b>	art 4	: Total financial asse	ets, line 36	\$6350.00		
59. <b>F</b>	art 5	5: Total business-rel	lated property, line 45		-	
60. <b>F</b>	art 6	6: Total farm- and fis	shing-related property, line	 ± 52	_	
01. <b>F</b>		7: Total other proper	ty not listed, line 34			
				-		
62. <b>T</b>		personal property. A	Add lines 56 through 61	\$19275.00		+ \$19275.00
62. <b>T</b>		personal property. A		\$19275.00	Copy personal property total ►	+ \$19275.00
	otal		Add lines 56 through 61	\$19275.00 ne 62		+ \$19275.00

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Fill in this information to identify your case:						
Debtor 1	Miranda First Name	N. Middle Name	Slotowski Last Name			
Debtor 2 (Spouse, if file	ing) First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	Northern	District of Illinois (State)			
Case number (If known)			(Otatio)			

#### Official Form 106C

#### Check if this is an amended filing

#### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Par	t 1: Identify the Property You Cla	im as Exempt				
1. 2.	Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.  ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)  For any property you list on Schedule A/B that you claim as exempt, fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption		
	Brief description: US Bank Line from Schedule A/B: 17	\$250.00	\$250.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)		
	Brief description:  Used Furniture  Line from Schedule A/B: 06	\$750.00	\$750.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every)  No  Yes. Did you acquire the property covered  No  Yes	3 years after that for ca				

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Debtor 1 Miranda Slotowski Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B 735 ILCS 5/12-1001(a) Brief \$350.00 **✓** description: \$350.00 **Used Clothing** 100% of fair market value, up to any applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(c) Brief \$9,725.00 **V** description: Dodge, Avenger, 2013 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 03 Brief 735 ILCS 5/12-1001(b) \$300.00 description: **V** \$300.00 x2 televisions; x1 tablet 100% of fair market value, up to any Line from applicable statutory limit 07 Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$800.00 description: **V** \$800.00 ring 100% of fair market value, up to any Line from applicable statutory limit 12 Schedule A/B: Brief 735 ILCS 5/12-1001(b) \$1,000.00 description: \$1,000.00 Chicago Asset 100% of fair market value, up to any Management applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(g)(4) \$5,000.00 **✓** description: \$5,000.00 **Child Support Arrears** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 29 Brief 735 ILCS 5/12-704 \$100.00 **V** description: \$100.00 Chase 100% of fair market value, up to any Line from applicable statutory limit

Schedule A/B:

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Fill in	this information to identify your case:					
Debto	or 1 Miranda	N.	Slotowski			
1	First Name	Middle Name	Last Name			
Debto						
(Spou	se, if filing) First Name	Middle Name	Last Name			
United	d States Bankruptcy Court for the:	Northern	District of Illinois			
Case	number		(State)			
(If know						
Offi	cial Form 106D			•		Check if this is a
		oro Who Hov	va Claima Sagur	ed by Dro		amended filing
	nedule D: Credite					12/1
	complete and accurate as possible is needed, copy the Additional Pa					
•	se number (if known).	igo, illi it out, number the t	ontries, and attaon it to this form	ii. On the top of any	additional pages, with	ic your name
1. D	Oo any creditors have claims secur	red by your property?				
	No. Check this box and submit thi	is form to the court with your	other schedules. You have nothing	else to report on this f	orm.	
Ŀ	Yes. Fill in all of the information be	elow.				
Part 1	List All Secured Claims					
2.	List all secured claims. If a creditor	has more than one secured	d claim, list the creditor separately	Column A	Column B	Column C
	for each claim. If more than one cred	•		Amount of claim	Value of	Unsecured
	much as possible, list the claims in a	alphabetical order according	to the creditor's name.	Do not deduct the	collateral	portion
				value of collateral.	that supports this claim	If any
2.1	BRIDGECREST CREDIT			\$19,020.00	\$9,725.00	\$9,295.00
	Creditor's Name 4020 E INDIAN SCHOOL RD	Describe the property the	at secures the claim:	<del></del>	<del></del>	
	Number Street	067 Automobile				
			ne claim is: Check all that apply.			
	PHOENIX Arizona 85018	Contingent				
	City State ZIP Code Who owes the debt? Check one.	Unliquidated Disputed				
	Debtor 1 only		hat apply			
	Debtor 2 only	Nature of lien. Check all the	,			
	Debtor 1 and Debtor 2 only	car loan)	de (such as mortgage or secured			
	At least one of the debtors and another	Statutory lien (such as	tax lien, mechanic's lien)			
	Check if this claim relates	Judgment lien from a l				
	to a community debt Date debt was 10/1/2015	Other (including a righ	t to offset)			
	incurred	Last 4 digits of account	number 2001			
	Honor Finance	Describe the property that	at socures the claim:	\$2,307.00	\$2,000.00	\$307.00
	Creditor's Name PO Box 1817	Describe the property the	at secures the claim:			
	Number Street	036 Automobile	ne claim is: Check all that apply.			
		Contingent	ie ciaim is. Oneck all that apply.			
	EvanstonIllinois60204CityStateZIP Code	Unliquidated				
	Who owes the debt? Check one.	Disputed				
	Debtor 1 only	Nature of lien. Check all the	hat apply.			
	Debtor 2 only		ide (such as mortgage or secured			
	Debtor 1 and Debtor 2 only	car loan)	au (ouer de mongage en occurou			
	At least one of the debtors and another	Statutory lien (such as	tax lien, mechanic's lien)			
	Check if this claim relates	Judgment lien from a l				
	to a community debt Date debt was 11/1/2012	Other (including a righ	t to offset)			
	incurred	Last 4 digits of account	number 4801			
		Lust + digits or docount	number			

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Filli	n this inform	ation to identify your case	e:					
Deb	otor 1	Miranda	N.	Slotowski				
		First Name	Middle Name	Last Name				
	otor 2	E	8 6° 1 11 - 8 1					
(Spc	ouse, it filing	First Name	Middle Name	Last Name				
Unit	ed States Ba	ankruptcy Court for the:	Northern	District of Illinois				
Coo	e number			(State)				
	nown)				—			
Off	icial F	orm 106E/F			<u>_</u>	Ch	eck if this is ar	n amended filing
			alitana Milaa	Harra Harrager				
<b>50</b>	neau	ile E/F: Cre	editors wno	Have Unsecu	red Claims			12/15
106Å that a entricknow	/B) and on are listed in es in the bo /n).	Schedule G: Executory Schedule D: Creditor xes on the left. Attach	y Ċontracts and Unexpired s Who Hold Claims Secur	esult in a claim. Also list exe I Leases (Official Form 106G ed by Property. If more spac this page. On the top of any	). Do not include any cre e is needed, copy the Pa	editors with art you nee	n partially sec ed, fill it out, n	cured claims number the
1.	Do any cre	editors have priority un	secured claims against yo	u?				
	_	o to Part 2.	,					
	Yes.							
2.	List all of	our priority unsecured	d claims. If a creditor has mo	ore than one priority unsecured	claim list the creditor sen	arately for e	ach claim Fo	r each claim
۷.	listed, identi much as po Continuation	ify what type of claim it is ossible, list the claims in a on Page of Part 1. If more	<ul> <li>If a claim has both priority a alphabetical order according than one creditor holds a p</li> </ul>	nd nonpriority amounts, list tha to the creditor's name. If you ha articular claim, list the other cre this form in the instruction boo	t claim here and show both ave more than two priority ditors in Part 3.	n priority and	nonpriority ar	mounts. As
						Total	Priority	Nonpriority
						claim	amount	amount

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Part 2: List All of Your NONPRIORITY Unsecured Claims  3. Do any creditors have nonpriority unsecured claims against you?  No. You have nothing to report in this part. Submit this form to the court with your other schedules.	
3. Do any creditors have nonpriority unsecured claims against you?	
No. You have nothing to report in this part. Submit this form to the court with your other schedules.	
✓ Yes.	
List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim	If a creditor has more than one priority
unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do r	
If more than one creditor holds a particular claim, list the other creditors in Part 3.lf you have more than four priority un	nsecured claims fill out the Continuation
Page of Part 2.	
	Total claim
4.1   Aarons Furniture   Last 4 digits of account number	\$700.00
6707 Londonderry Way When was the debt incurred? n/a	<u>.                                    </u>
Number Street  As of the date you file, the claim is: Check	s all that apply.
Contingent	. а и ак арруу
Union City Georgia 30291 City State Zip Code Unliquidated	
Who incurred the debt? Check one.	
Debtor 1 only  Type of NONPRIORITY unsecured claim:	
Debtor 2 only	
Debtor 1 and Debtor 2 only	
At least one of the debtors and another  Obligations arising out of a separation at that you did not report as priority claims	greement or divorce
Check if this claim relates to a community debt  Debts to pension or profit-sharing plans,	, and other similar
Is the claim subject to offset?	
No Other. Specify Furniture	
Yes	
4.2 ARMOR SYSTEMS CO Last 4 digits of account number 664	3 \$1,005.00
Nonpriority Creditor's Name 1700 KIEFER DR STE 1  When was the debt incurred?  5/1/20	
Number Street	<u></u>
As of the date you file, the claim is: Check	call that apply.
ZION Illinois 60099 Contingent	
City State Zip Code Unliquidated  Who incurred the debt? Check one.	
Debtor 1 only	
Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	
At least one of the debtors and another  Obligations arising out of a separation at that you did not report as priority claims	greement or divorce
Check if this claim relates to a community debt  Debts to pension or profit-sharing plans, debts	, and other similar
is the claim subject to offset?  Out Collection; Colle	
ORIGINAL CREDIT  Yes  Other. Specify COLLEGE OF LAKE COLLEGE O	
Bank of America Nonpriority Creditor's Name  Last 4 digits of account number	\$300.00
Po Box 26078 When was the debt incurred? n/a Number Street	<u> </u>
As of the date you file, the claim is: Check	call that apply.
Greensboro North Carolina 27420 Contingent	
City State Zip Code Unliquidated	
Who incurred the debt? Check one.  Disputed  Disputed	
Type of NONPRIORITY unsecured claim:	
Debtor 2 only  Type of NONPRIORITY unsecured claim:  Student loans	
Debtor 2 only  Debtor 1 and Debtor 2 only  Debtor 1 and Debtor 2 only  Obligations arising out of a separation as	greement or divorce
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation at that you did not report as priority claims	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation at that you did not report as priority claims Debts to pension or profit-sharing plans,	
Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim relates to a community debt  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation at that you did not report as priority claims  Debts to pension or profit-sharing plans,	, and other similar

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Slotowski Debtor 1 Miranda Case number (if known) First Name Middle Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 Capital One \$1,145.00 Last 4 digits of account number \_\_\_\_\_1430 Nonpriority Creditor's Name Po Box 30281 When was the debt incurred? 8/1/2010 Street Number As of the date you file, the claim is: Check all that apply. Contingent Salt Lake Cty Utah 84130 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? CreditCard Other. Specify\_ **✓** No Yes CAPITAL ONE BANK USA N 4.5 \$1,145.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 85520 When was the debt incurred? 8/1/2010 Number Street As of the date you file, the claim is: Check all that apply. Contingent RICHMOND 23285 Virginia Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? CreditCard Other. Specify **✓** No Yes Colonial Park Apartments 4.6 \$2,500.00 Last 4 digits of account number \_ Nonpriority Creditor's Name 748 Sharon Ave When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Park City Illinois 60085 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify \_\_\_ Judgment **✓** No

Yes

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Debto	r 1 Miranda N.	Slotowski Case number (if known)	
	First Name Middle Name	Last Name	
Part 2	Your NONPRIORITY Unsecured Claims - Con	itinuation Page	
	After listing any entries on this page, number them beginn		Total claim
4.7	Comcast	Last 4 digits of account number	\$50.00
	Nonpriority Creditor's Name 11621 E. Marginal Way # 5	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Bankruptcy Dept	Contingent	
		i i	
	Seattle Washington 98168 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts  Other Specify  Heility	
	Is the claim subject to offset?	✓ Other. Specify Utility	
	<u>✓</u> No		
	Yes		
4.8	COMMONWEALTH FINANCIAL	Last 4 digits of account number 40N1	\$1,146.00
	Nonpriority Creditor's Name 245 Main St	When was the debt incurred? 3/1/2016	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Scranton Pennsylvania 18519	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.  Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts  001 Collection; Collecting for	
	✓ No	ORIGINAL CREDITOR:	
	Yes	Other. Specify <u>MEDICAL PAYMENT DATA</u>	
4.9	David J Axelrod & Associates	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name 1448 Old Skokie Valley Rd	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Highland Park Illinois 60035	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.  Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	Check if this claim relates to a community debt	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts	
	✓ No	Other. Specify s	
	Yes		

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Debtor 1 Miranda Slotowski Case number (if known) First Name Middle Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 Everest College Bedford Park \$1,000.00 Last 4 digits of account number Nonpriority Creditor's Name 7414 South Cicero Avenue When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Illinois 60629 Chicago Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify \_ School **✓** No l Yes I C SYSTEM INC 4.11 \$177.00 Last 4 digits of account number Nonpriority Creditor's Name 444 Hwy 96 E When was the debt incurred? 12/1/2012 Number As of the date you file, the claim is: Check all that apply. Contingent 55127 Saint Paul Minnesota Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 001 Collection; Collecting for |~| **✓** No ORIGINAL CREDITOR KINDERCARE LEARNING Yes Other. Specify **CENTERS** 4.12 Illinois Tollway \$450.00 Last 4 digits of account number Nonpriority Creditor's Name 2700 Ogdén Ave When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Legal Dept Contingent Illinois 60515 **Downers Grove** Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? **Tollway Violations** ✓ Other. Specify \_ **✓** No

☐ Yes

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Debtor		Slotowski Case number (if known)	
		Last Name	
Part 2:	Your NONPRIORITY Unsecured Claims - Conti	nuation Page	
	After listing any entries on this page, number them beginn	ing with 4.5, followed by 4.6, and so forth.	Total claim
4.13	Plain Green Nonpriority Creditor's Name	Last 4 digits of account number	\$500.00
	93 Mack Road, Suite 600	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	Box Elder Montana 59521	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.  Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify Loan	
	✓ No ☐ Yes		
444	Sprint		\$80.00
4.14	Nonpriority Creditor's Name	Last 4 digits of account number	\$60.00
	P.O. Box 219554 Number Street	When was the debt incurred?n/a	
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Kansas City Missouri 64121 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans  Obligations arising out of a separation agreement or divorce	
	Debtor 1 and Debtor 2 only	that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim relates to a community debt Is the claim subject to offset?	✓ Other. Specify	
	No		
	Yes		
4.15	SW CRDT SYS	Last 4 digits of account number 3650	\$215.00
	Nonpriority Creditor's Name 2629 DICKERSON PK	When was the debt incurred? 3/1/2016	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	CARROLLTON Texas 75007 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	No	001 Collection; Collecting for ORIGINAL CREDITOR: 10 COM	
	Yes	Other. Specify	

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Debtor 1	I <u>Miranda</u>	N.	Slotowski	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NONPRIORITY U	nsecured Claims -	<b>Continuation Page</b>		
	After listing any entries on th	nis page, number them	beginning with 4.5, follo	owed by 4.6, and so forth.	Total claim
	US Cellular		Last 4 digits	s of account number	\$500.00
	Nonpriority Creditor's Name Dept 0205		•	the debt incurred? n/a	
	Number Street				
			As of the da	ate you file, the claim is: Check all that apply.	
•			Continge	ent	
	Palatine Illino	ois 60055	Unliquid	lated	
	City State	'	e Disputed	d	
	Who incurred the debt? Che Debtor 1 only	eck one.	Type of NON	NPRIORITY unsecured claim:	
	Debtor 2 only		Student I	loans	
	Debtor 1 and Debtor 2 only	,		ons arising out of a separation agreement or di	ivorce
	At least one of the debtors a	and another	<b>—</b> '	did not report as priority claims	"
	Check if this claim relates to a community debt			pension or profit-sharing plans, and other sim	nilar
	Is the claim subject to offset	•		Specify Utility	
	No	••	_	· · · · · · · · · · · · · · · · · · ·	
	=				
	Yes				

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Debtor 1 Miranda Slotowski Case number (if known) First Name Add the Amounts for Each Type of Unsecured Claim Part 4: Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 Total claims 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government 6b. 6c. Claims for death or personal injury while you were \$0.00 intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$0.00 **Total claims** 6f. Student loans 6f. from Part 2 6g. Obligations arising out of a separation agreement or \$0.00 divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h.

6i. Other. Add all other nonpriority unsecured claims. Write

that amount here.

6j. Total. Add lines 6f through 6i.

\$10,913.00

\$10,913.00

6j.

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Fill in this information to identify your case:						
Debtor 1	Miranda	N.	Slotowski			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing	g) First Name	Middle Name	Last Name			
United States E	Bankruptcy Court for the:	Northern	District of Illinois			
Case number (State)  (If known)						

Officia	al For	m 1	06G

Check if this is an amended filing

#### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Debtor 1 Mirrada N. Slotovaski First Name Middle Name Last Name Debtor 2 (Spouse, if Iffinio) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State)  Case number (Ill known)  Case number (Il						
Pictor   Name   Middle Name   Last Name	Fill in	this inforn	nation to identify your cas	e:		
Debtor 2 (Spouse, if filing) First Name	Debto	r 1	Miranda	N.	Slotowski	
Case number			First Name	Middle Name	Last Name	
United States Bankruptcy Court for the: Northern District of Illinois (State)    Case number (If known)			V =			
Case number (If known)    Check if this is an amended filing	(Spou	se, it tilinç	First Name	Middle Name	Last Name	
Case number ((It known))    Check if this is an amended filling	United	d States E	ankruptcy Court for the:	Northern	District of Illinois	
Check if this is an amended filing   Check if	Cooo	numbor			(State)	
Official Form 106H  Schedule H: Your Codebtors  12/15  Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filling ogether, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entiries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.  1. Do you have any codebtors? (if you are filing a joint case, do not list either spouse as a codebtor.)  No Yes  2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)  No Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  Name of your spouse, former spouse, or legal equivalent  Number Street  City State Zip Code  3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, cereditor to whom you owe the debt Check all schedules that apply:  Column 1: Your codebtor  Name						
Schedule H: Your Codebtors    Schedule H: Your Codebtors   Schedule H: Your Codebtors						Check if this is an
Schedule H: Your Codebtors   Schedule H: Your Codebtors   Schedule H: Your Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing ogether, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the norties in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.						amended filing
Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filling ogether, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.  1. Do you have any codebtors? (if you are filing a joint case, do not list either spouse as a codebtor.)    No   Yes	Offi	cial I	Form 106H			
Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filling ogether, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.  1. Do you have any codebtors? (if you are filing a joint case, do not list either spouse as a codebtor.)    No   Yes	Sch	Adul	a H. Vaur C	ndahtars		42/45
ogether, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.  1. Do you have any codebtors? (if you are filing a joint case, do not list either spouse as a codebtor.)  No Yes  2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)  No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  Name of your spouse, former spouse, or legal equivalent  Number Street  City State Zip Code  3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or costigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom you owe the debt  Check all schedules that apply:  3. Taylor, Terrane  Name						
antries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known).    Doyou have any codebtors? (if you are filing a joint case, do not list either spouse as a codebtor.)   No   Yes   Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)   No. Go to line 3.						
1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)    No   Yes	_	-			•	
Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louislana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)  No. Go to line 3.  Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  Name of your spouse, former spouse, or legal equivalent  Number Street  City State Zip Code  3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F, (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom you owe the debt Check all schedules that apply:  3.1 Taylor, Terrane Name	Answe	r every q	uestion.			
Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louislana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)  No. Go to line 3.  Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  Name of your spouse, former spouse, or legal equivalent  Number Street  City State Zip Code  3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F, (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom you owe the debt Check all schedules that apply:  3.1 Taylor, Terrane Name	1.	Do you	have any codebtors? (I	f you are filing a joint case, do	not list either spouse as a	a codebtor.)
2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)  No. Go to line 3.  Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  No  Yes. In which community state or territory did you live?  Fill in the name and current address of that person.  Name of your spouse, former spouse, or legal equivalent  Number Street  City State Zip Code  3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom you owe the debt  Check all schedules that apply:  3.1 Taylor, Terrane  Name					•	,
Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)  No. Go to line 3.  Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  No Yes. In which community state or territory did you live?  Fill in the name and current address of that person.  Name of your spouse, former spouse, or legal equivalent  Number Street  City State Zip Code  3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom you owe the debt Check all schedules that apply:  3.1 Taylor, Terrane Name		✓ Yes	3			
No. Go to line 3.  Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  No Yes. In which community state or territory did you live?  Fill in the name and current address of that person.  Name of your spouse, former spouse, or legal equivalent  Number Street  City State Zip Code  3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F, (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom you owe the debt Check all schedules that apply:  3.1 Taylor, Terrane Name	2.	Within t	he last 8 years, have yo	ou lived in a community pro	perty state or territory? (	(Community property states and territories include Arizona, California,
Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?    Yes. In which community state or territory did you live?		Idaho, Lo	ouisiana, Nevada, New M	exico, Puerto Rico, Texas, Wa	shington, and Wisconsin.)	
No Yes. In which community state or territory did you live? Fill in the name and current address of that person.  Name of your spouse, former spouse, or legal equivalent  Number Street  City State Zip Code  3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom you owe the debt Check all schedules that apply:  3.1 Taylor, Terrane Name  Schedule D, line 2.2		✓ No	. Go to line 3.			
Yes. In which community state or territory did you live?		Yes	s. Did your spouse, forme	r spouse, or legal equivalent l	ve with you at the time?	
Name of your spouse, former spouse, or legal equivalent    Number   Street		뇓				
Number Street  City State Zip Code  3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom you owe the debt  Check all schedules that apply:  3.1 Taylor, Terrane  Name  Schedule D, line 2.2		Ш	Yes. In which community	ty state or territory did you live	? Fil	ill in the name and current address of that person.
Number Street  City State Zip Code  3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom you owe the debt  Check all schedules that apply:  3.1 Taylor, Terrane  Name  Schedule D, line 2.2			Name of various of the		la sak	<u></u>
City State Zip Code  3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom you owe the debt  Check all schedules that apply:  3.1 Taylor, Terrane  Name  Schedule D, line 2.2			name of your spouse, for	ormer spouse, or legal equiva	ent	
City State Zip Code  3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom you owe the debt  Check all schedules that apply:  3.1 Taylor, Terrane  Name  Schedule D, line 2.2			Number Street			<del></del>
3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom you owe the debt  Check all schedules that apply:  3.1 Taylor, Terrane  Name						
again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom you owe the debt  Check all schedules that apply:  3.1 Taylor, Terrane  Name  Schedule D, line 2.2			City	State	Zip Code	<del></del>
again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor  Column 2: The creditor to whom you owe the debt  Check all schedules that apply:  3.1 Taylor, Terrane  Name  Schedule D, line 2.2	2	In Colur	nn 1 list all of your coo	lohtors. Do not include you	r engues as a codobtor i	if your enauge is filling with you. List the person shown in line?
Column 1: Your codebtor  Column 2: The creditor to whom you owe the debt  Check all schedules that apply:  Taylor, Terrane Name  Schedule D, line 2.2	J.					
Check all schedules that apply:    Taylor, Terrane		Schedu	le E/F (Official Form 10	6E/F), or Schedule G (Offic	al Form 106G). Use Sche	nedule D, Schedule E/F, or Schedule G to fill out Column 2.
Check all schedules that apply:    Taylor, Terrane		Column	1. Vour oodobtor			Column 2: The graditar to whom you awa the daht
Taylor, Terrane Name  Schedule D, line 2.2		Column	1: Your codeptor			Column 2: The creditor to whom you owe the dept
Name Scriedule D, line 2.2						Check all schedules that apply:
Name ————	3.1	Taylor, T	errane			Schedule D, line 2.2
		Name				
1308 Ardmore Dr. Schedule E/F, line			1308 Ardmore Dr.			Scheaule E/F, line
Number Street  Round Lake Illinois 60073  Schedule G, line		N Is seen In a	Ctus at			_ <b>_</b>

Zip Code

City

State

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=::: (1 * *						
	formation to identif	•				
Debtor 1	Miranda First Name	N. Middle Name	Slotowski Last Name	2	_	
Debtor 2	i ii st i vaine	Wildale Name	Lastivani	,		Check if this is:
(Spouse, if filing	g) First Name	Middle Name	Last Name	e	_	An amended filing
United States E	Bankruptcy Court for the:	Northern	District of Illinoi		_	A supplement showing post-petition chapter expenses as of the following date:
Case number (If known)			(Cidit		-	MM / DD / YYYY
Official I	Form 106I					
3chedu	le I: Your Ind	come				12
nclude info Idditional p	rmation about you	r spouse. If more spa ame and case numbe	ice is needed,	attach a s	eparate sh	ise is not filing with you, do not eet to this form. On the top of any
	in your employment		Debtor 1			Debtor 2
	ormation. ou have more than one	Employment status	Employed  Not Emplo	yed		Employed  Not Employed
	ch a separate page with rmation about additional	Occupation	BDC Rep			
	ployers.	Employer's name	Ray Chevrolet			
or	ude part time, seasonal, -employed work.	Employer's address	39 N Route 12 Number Street			Number Street
	cupation may include					
	omemaker, if it applies.		Fox Lake City	Illinois State	60020 Zip Code	City State Zip Code
		How long employed there?	2 years			
Estimate mo you are separa	ated.	date you file this form. If y	-			the space. Include your non-filing spouse unless on on the lines below. If you need more space,
				For D	ebtor 1	For Debtor 2 or non-filing spouse
deduction	ns.) If not paid monthly, ca	ry, and commissions (befor alculate what the monthly wag			\$2,080.00	
<ol><li>Estimate</li></ol>	e and list monthly over	time pay.	3.		+ \$175.50	

4. Calculate gross income. Add line 2 + line 3.

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Debtor 1	Miranda	N. Middle Name	Slotowski	Case number (if ki	nown)	
	First Name	Middle Name	Last Name	For Dentor 1	For Debtor 2 or non-filing spouse	
Сору	line 4 here		4.	\$2,255.50		
-	ll payroll ded	uctions				
		and Social Security deductions	5a.	\$346.06		
		ntributions for retirement plans	5b.	\$0.00		
		ributions for retirement plans	5c.	\$0.00		
	-	yments of retirement fund loans	5d.	\$0.00		
	surance	yments of retirement rund loans	5e.	\$0.00		
		port obligations	5e. 5f.	-		
		oort obligations		\$0.00		
Ū	nion dues	C*	5g.	\$0.00		
		ons. Specify:		\$137.28 +		
6. <b>Add ti</b> +5h.	ne payroll de	ductions. Add lines 5a + 5b + 5c + 5d + 5e +	5f + 5g 6.	\$483.34		
7. Calcu	late total moi	nthly take-home pay. Subtract line 6 from line	<del>2</del> 4. 7.	<u>\$1,772.16</u>		
8. List al	I other incom	ne regularly received:				
		om rental property and from operating a ession, or farm				
re		ent for each property and business showing gr y and necessary business expenses, and the t me.		\$0.00		
	terest and di		8b.	\$0.00		
8c. <b>F</b> a	amily suppor	t payments that you, a non-filing spouse, ularly receive		φο.σο		
In	clude alimony,	spousal support, child support, maintenance, int, and property settlement.	8c.	\$0.00		
8d. <b>U</b>	nemploymen	t compensation	8d.	\$0.00		
8e. <b>S</b> e	ocial Security	,	8e.	\$0.00		
Inc as the su	clude cash ass sistance that y e Supplementa bsidies	ent assistance that you regularly receive istance and the value (if known) of any non-cas ou receive, such as food stamps (benefits undal Nutrition Assistance Program) or housing				
		ssistance Programs Income	8f.	\$250.00		
J		irement income	8g.	\$0.00		
8h. <b>O</b>	ther monthly	income. Specify: Monthly Bonus - NET	8h. +	\$1,400.00 +		
		<b>ne</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g		\$1,650.00		
		income. Add line 7 + line 9. ne 10 for Debtor 1 and Debtor 2 or non-filing s	10. pouse	\$3,422.16	=	\$3,422.16
Includ relativ	de contribution: /es.	ular contributions to the expenses that your strom an unmarried partner, members of your amounts already included in lines 2-10 or amounts	household, your dep	endents, your roommates, a		
		amounts aneady included in lines 2-10 or amou	ii its ti iat are not avail	able to pay expenses listed i	11. +	- \$0.00
Speci	ııy.					φυ.υυ
		n the last column of line 10 to the amount in the Summary of Schedules and Statistical Su				\$3,422.16
						Combined monthly income
	<b>ou expect an</b> No.	increase or decrease within the year after	you file this form?			,
	Yes. Explain:					

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Debtor 1 Miranda N. Slotowski Case number (if known)
First Name Middle Name Last Name

#### Part 2: Give Details About Monthly Income

	For Debt	tor 1	For Debtor 2 or non-filing spouse	
5h.Other payroll deductions. Specify:				
1. AFLAC		\$26.52		
2. AFLAC STD		\$72.24		
3. Dental		\$29.77		
4. Vision		\$8.75		

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Fill in this infor	mation to identify your cas	se:				
Debtor 1	Miranda	N.	Slotowski			
Debioi 1	First Name	Middle Name	Last Name			
Debtor 2				Check if this is:		
(Spouse, if filing	ng) First Name	Middle Name	Last Name	An amended filing	g	
United States	Bankruptcy Court for the:	Northern	District of Illinois (State)	A supplement she expenses as of the	owing post-petition one following date:	chapter 13
Case number (If known)						
()				MM / DD / YYYY	,	
Official	Form 106J					
Schedu	le J: Your Ex	nenses				12/1
information. If (if known). An		attach another sheet to this	e filing together, both are equally form. On the top of any additiona			ber
1. Is this a joi	int case?					
✓ No. G	o to line 2					
Yes. D	oes Debtor 2 live in a se	eparate household?				
-	No					
	Yes. Debtor 2 must file	e Official Forms 106J-2, Expen	ses for Separate Household of Debt	or 2.		
2. Do you had dependents?		0				
Do not list [ Debtor 2.		es. Fill out this information for ach dependent	Dependent's relationship to Debtor 1 or Debtor 2 Child	Dependent's age 5 years	Does depended with you?  No.  Yes.	nt live
	•					
Part 2: Esti	imate Your Ongoing	Monthly Expenses				
_	of a date after the bank		you are using this form as a supp plemental Schedule J, check the	•	•	
	-	cash government assistance t on Schedule I: Your Income	-		Your	expenses
	I or home ownership exporthe ground or lot. 4.	penses for your residence. In	clude first mortgage payments and		4.	\$850.00
If not inc	luded in line 4:					
4a. Real e	estate taxes				4a	\$0.00
4b. Prope	rty, homeowner's, or rente	er's insurance			4b	\$0.00
4c. Home	maintenance, repair, and u	upkeep expenses			4c.	\$0.00
4d. Home	owner's association or cor	ndominium dues			4d.	\$0.00

4d.

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Debtor 1 Miranda Slotowski Case number (if known) First Name Middle Name Last Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$270.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$242.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$450.00 7. 8. Childcare and children's education costs \$433.00 8. 9. Clothing, laundry, and dry cleaning 9. \$150.00 10. Personal care products and services 10. \$150.00 11. Medical and dental expenses \$50.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$300.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance 15c \$100.00 15d. Other insurance. Specify: \_\_\_\_ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$420.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

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Debtor 1	Miranda	N.	Slotowski	Case number (if known)		
	First Name	Middle Name	Last Name			
21. <b>Other</b>	Specify:				21	\$0.00
22. Calcu	ulate your monthly ex	xpenses.				\$3,415.00
22a. A	Add lines 4 through 21.					\$0.00
22b. (	Copy line 22 (monthly e	expenses for Debtor 2), if any, fro	om Official Form 106J-2			\$3,415.00
22c. A	Add line 22a and 22b. T	The result is your monthly expen-	ses.		22.	
23.Calcu	late your monthly ne	et income.				
23a. 0	Copy line 12 (your com	bined monthly income) from Sch	nedule I.		23a	\$3,422.16
23b. C	Copy your monthly expe	enses from line 22 above.			23b	\$3,415.00
23c. S	Subtract your monthly e	expenses from your monthly inco	me.			\$7.16
	The result is your mon	thly net income.			23c	
24 Do.	ou ovnoct an increas	e or decrease in your expens	os within the year after you	u filo this form?		
•	•					
		ct to finish paying for your car loan ease or decrease because of a r				
	gage payment to incre	ease of decrease because of a f	nodification to the terms of yo	our mongage:		
<b>✓</b> 1	No					
	/es					
	Explain here:					
	Explain nere.					

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Fill in this information to identify your case:						
Debtor 1	Miranda First Name	N. Middle Name	Slotowski Last Name			
Debtor 2						
(Spouse, if filing) First Name		Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	Northern	District of Illinois (State)			
Case number			(State)			
(If known)				•		

#### Official Form 106Dec

### Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t1: Sign Below						
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?						
	☑ No						
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).					
	Under penalty of perjury, I declare that I have read the summary at that they are true and correct.	nd schedules filed with this declaration and					
40	·						
X	7-57	*					
	Signature of Debtor 1	Signature of Debtor 2					
	Date <b>9/28/2016</b>	Date					
	MM/DD/YYYY	MM/DD/YYYY					

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Fill in this	s information to identify y	our case:					
Debtor 1	Miranda	N.	Slotowsk	i			
	First Name	Middle	Name Last Nam	ne			
Debtor 2	if filing) First Name	8.4° -1.41 -	NI I(NI				
(Spouse,	ii iiiiii9) First Name	Middle	Name Last Nam	ne			
United St	tates Bankruptcy Court fo	or the: Northern	District of Illino	-			
Case nur (If known)			(Star	ie)			
Offici	ial Form 107	7					Check if this is an amended filing
State	ment of Fin	ancial Affair	s for Individua	als Filing	for Ba	ankruptcy	12/15
space is r question.	needed, attach a separ	ate sheet to this form. (	ed people are filing togethen On the top of any additions us and Where You Liv	al pages, write you			correct information. If more known). Answer every
1. W	hat is your current ma	rital status?					
L Z	Married Not married						
2. Du	uring the last 3 years, h	ave you lived anywher	e other than where you live	now?			
_	1 No		•				
	No Yes, List all of the plac	es vou lived in the last 3 v	rears. Do not include where y	ou live now.			
		,,	,				
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there
				Same as De	ebtor 1		Same as Debtor 1
	1308 Ardmore Dr.		From 01/2013				From
	Number Street			Number Street			
			To <u>10/2014</u>	-			To
	Round Lake Illing			City	Ctoto	Zin Codo	
	City Stat	e Zip Code		City	State	Zip Code	
				Same as De	ebtor 1		Same as Debtor 1
	Number Street		From	Number Street			From
	Number Street		To	Number Street			To
			- 				-
	City Stat	e Zip Code		City	State	Zip Code	
			ouse or legal equivalent in a, Nevada, New Mexico, Pue				nmunity property states and

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

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Debt	or 1	Miranda First Name	N. Middle I			Case number <i>(i</i>	f known)	
		First Name			Name			
Part	2:	Explain the Sources of	Your l	ncome				
<ul> <li>Did you have any income from employment or from operating a business during this year or the two previous calendar years?         Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.     </li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>								years?
				Debtor 1		Debt	or 2	
				Sources of income Check all that apply.	Gross income (before deductions a exclusions)		ces of income k all that apply.	Gross income (before deductions and exclusions)
		rom January 1 of current year ne date you filed for bankruptc	until	✓ Wages, commissions, bonuses, tips Operating a business	\$31573.50	 	Nages, commissions, conuses, tips Operating a cusiness	
		or last calendar year: anuary 1 to December 31, 201		✓ Wages, commissions, bonuses, tips ☐ Operating a business	\$30000.00	 	Wages, commissions, conuses, tips Operating a ousiness	
		or the calendar year before that anuary 1 to December 31, 201	4	✓ Wages, commissions, bonuses, tips  Operating a business	\$18000.00	 '	Wages, commissions, conuses, tips Operating a ousiness	
l b	ncludoene case	you receive any other income of de income regardless of whether fit payments; pensions; rental income and you have income that you re each source and the gross income No Yes. Fill in the details.	that inco ome; int ceived to	ome is taxable. Examples erest; dividends; money o ogether, list it only once un	s of other income are alim- collected from lawsuits; ro nder Debtor 1.	yalties; and ga	mbling and lottery wir	
				Debtor 1		Deb	tor 2	
				Sources of income Describe below.	Gross income fi each source (before deduction exclusions)	Des	rces of income cribe below.	Gross income from each source (before deductions and exclusions)
	_			Link	\$1,680.00			
		rom January 1 of current year he date you filed for bankrupto		Child Support	\$228.97			
		For last calendar year:  January 1 to December 31, 20  YY		Child Support	\$413.23			
		For the calendar year before the January 1 to December 31, 20	14 )					

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tor 1			N. Middle Name	Slotowski	Case numb	er (if known)		
	First Name			Last Name				
3:	List Certain	Payments \	ou Made B	efore You Filed for E	Bankruptcy			
Are e	either Debtor 1's	or Debtor 2's	s debts primar	ily consumer debts?				
<u> </u>			otor 2 has prim	-	onsumer debts are defined	in 11 U.S.C. § 101(8) as "incu	rred by an individual	
	During the 9	0 days before y	ou filed for banl	kruptcy, did you pay any cre	editor a total of \$6,425* or mo	ore?		
	No. Go	to line 7.						
Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.								
	* Subject to	adjustment on 4	1/01/19 and eve	ery 3 years after that for case	es filed on or after the date o	f adjustment.		
<b>✓</b> Y	es. Debtor 1 or	Debtor 2 or k	ooth have prin	narily consumer debts.				
	During the 9	0 days before y	ou filed for banl	kruptcy, did you pay any cre	ditor a total of \$600 or more	?		
	✓ No. Go	to line 7.						
Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.								
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for	
-	Creditor's Name						Mortgage Car	
Ī	Number Street						Credit card  Loan repayment	
-	City	State 2	Zip Code				Suppliers or vendors  Other	
-	Creditor's Name						Mortgage Car	
-	Number Street						Credit card Loan repayment	
(	City	State 2	Zip Code				Suppliers or vendors Other	
-	Creditor's Name						Mortgage	
Ī	Number Street						Car Credit card Loan repayment	
<del>-</del>	City	State 2	Zip Code				Suppliers or vendors	

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Debtor 1	Miranda		N.	Slo	otowski	Case number (	if known)
	First Name		Middle Name		st Name		
Insi cor age	iders include your re porations of which y	elatives; any ou are an of r a business	general partners; fficer, director, per	relatives of any grown in control, or	owner of 20% or mo	tnerships of which y re of their voting se	ho was an insider? rou are a general partner; curities; and any managing mestic support obligations,
<b>✓</b>	No						
	Yes. List all payme	ents to an ins	sider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Insider's Name						
	Number Street						
	-	<u> </u>					
	City	State	Zip Code				
insi	thin 1 year before yider? ude payments on de				payments or trans	fer any property o	n account of a debt that benefited an
	Yes. List all payme	nts that ben	efited an insider.				
				Dates of	Total amount	Amount you	Reason for this payment
				payment	paid	still owe	Include creditor's name
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				

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Debtor	1 Miranda First Name	N. Middle Nam	20	Slotowski Last Name		Case number (if	known)	
Dout 4								
Part 4:	Identify Leg	al Actions, Reposse	essions,	and Foreciosure	·S			
Lis		e you filed for bankruptcy including personal injury ca						ng? r custody modifications, and
Ē	No	-6-7-						
V	Yes. Fill in the d	etails.	Natur	e of the case	Court or	agency		Status of the case
	Case title		Civil	e of the case				✓ Pending
	Colonial Park Slotowski	Apartments vs Miranda			Court Nar	nty Circuit Cou ne	τ	On appeal
	Case number 12LM2145				NumberS	treet		Concluded
					City	State	Zip Code	
	Case title							Pending
	Case number				Court Nar	ne		On appeal
	——————————————————————————————————————				NumberS	treet	_	Concluded
					City	State	Zip Code	
Ē	No. Go to line Yes. Fill in the i	nformation below.		Describe the prop	erty		Date	Value of the
				Wages			09/2016	property
	Colonial Park	•		ages			08/2016	\$458
	748 Sharon Av	e		Explain what happ	ened			
	Number Stre							
				Property was re	•			
	Dork City	Illinoin 6000	F	Property was fo  ✓ Property was ga				
	Park City City	State Zip Co		Property was at		, or levied.		
				Describe the prop	erty		Date	Value of the property
	Creditor's Nar	Name		Explain what happ	Explain what happened			
	Number Stre	et						
				Property was re	•			
				Property was fo				
	City	State Zip Co	ode	Property was ga		, or levied.		

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Debtor	1	Miranda First Name	N. Middle Name	Slotowski Last Name	Case number (if known)		
		hin 90 days before you file ounts or refuse to make a p			nk or financial institution, s	et off any amou	nts from your
[ [	<b>✓</b>	No Yes. Fill in the details.					
				Describe the action the	creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street		Last 4 digits of account nu	ımber: XXXX-		
		City State	Zip Code				
		nin 1 year before you filed ointed receiver, a custodia		of your property in the p	ossession of an assignee fo	or the benefit of	creditors, a court-
	<b>✓</b>	No Yes					
Part 5		List Certain Gifts and					
13.	Wi ✓	thin 2 years before you file	ed for bankruptcy, did yo	ou give any gifts with a to	tal value of more than \$600	per person?	
		Yes. Fill in the details for ea	ach gift.				
		Gifts with a total value of per person	i more than \$600	Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Gave	the Gift				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person to Whom You Gave	the Gift				
		Number Street					
		City State Person's relationship to you	Zip Code				

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ebtor 1	Miranda First Name	N. Middle Name	Slotowski Last Name	Case number (if known)		
. W	thin 2 years before you	ı filed for bankruptcy, di	d you give any gifts or contribu	tions with a total value of	f more than \$600	to any charity?
¥		or each gift or contributior	,			
_		-		bode d	D-1	Malara
	Gifts or contribution that total more than		Describe what you contri	butea	Date you contributed	Value
	that total more than	<b>\$000</b>			Contributed	
			_		-	
	Charity's Name					
			_			
	Ni sada sa Otas at		_			
	Number Street					
	City St	ate Zip Code	_			
6:	List Certain Loss	••				
<b>✓</b>	No Yes. Fill in the details.  Describe the propert how the loss occurre	• •	Describe any insurance of Include the amount that insurance claims of A/B: Property.	urance has paid. List	Date of your loss	Value of property lost
abo	out seeking bankruptcy	filed for bankruptcy, did or preparing a bankru	you or anyone else acting on you petition? or credit counseling agencies for se			nyone you consulted
	No					
✓	Yes. Fill in the details.		Description and value of	any property	Date payment	Amount of
			transferred		or transfer was made	payment
	Semrad Law Firm		Attorney's Fee - 0.00		9/28/2016	\$0.00
	Person Who Was Paid				3/20/2010	φο.οο
	20 South Clark Street					
	Number Street					
	Chicago Illi	nois 60606	_			
		ate Zip Code	_			
	J, Ou					
	Email or website addre	ess	_			
	None Person Who Made the Payment, if Not You		_			
	Person Who Made the Payment, if Not You					
	Person Who Was Paid		_			
	Number Street		_			
			The state of the s			
	-		_			
	Cit.	7:01	_ _			
	City Sta	ate Zip Code	_			
	City Sta		_ _ _			
		ess				

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Deb	tor 1	Miranda	N.		se number (if known)		
		First Name	Middle Name	Last Name			
17.	help	hin 1 year before you filed for by you deal with your creditors not include any payment or trans  No  Yes. Fill in the details.	or to make payments		f pay or transfer a	any property to any	one who promised to
	ш	res. I ill ill the details.				_	
				Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
		Person Who Was Paid					
		Number Street					
		City. State	Zin Codo				
		City State	Zip Code				
		ude both outright transfers and t sfers that you have already listed No Yes. Fill in the details.		rity (such as the granting of a security i			Do not include gifts and
				Description and value of any property transferred		y property or eceived or debts pa	Date transfer was made
		Person Who Received Transfe	er er				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person Who Received Transfe	er				
		Number Street					
		City State Person's relationship to you	Zip Code				
19.		hin 10 years before you filed ese are often called asset-protec		u transfer any property to a self-set	tled trust or simil	ar device of which	you are a beneficiary?
	<b>V</b>	No Yes. Fill in the details.					
	Ц	res. Fill III the détalls.		Description and value of the pro	perty transferred		Date transfer was made
		Name of trust					

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Debtor 1	Miranda First Name	N. Middle Name	Slotowski Last Name	Case number (if known)	
Part 8:	ı		struments, Safe Deposit Bo	oxes, and Storage Units	
20. Wit mo Incl	thin 1 year before you byed, or transferred?	filed for bankruptcy, we	ere any financial accounts or ins	truments held in your name, or for your structure in banks, credit unions, broke	
<b>✓</b>	No Yes. Fill in the details.		Lock A divide of account	Time of account on	to Lost belows
			Last 4 digits of account number	clo	te Last balance count was before sed, sold, closing or oved, or transfer nsferred
	Person Who Was Paid		- XXXX-	Checking Savings	
	Number Street		-	Money market Brokerage Other	
	City Sta	te Zip Code	-		
	Person Who Was Paid		_ XXXX- _	Checking Savings	
	Number Street		-	Money market Brokerage	
	City Sta	te Zip Code	-	Other	
	ner valuables?    No   Yes. Fill in the details.	ou nave within 1 year	Who else had access to it?	Describe the contents	Do you still have it?
	Name of Financial Ins	titution	Name		☐ No ☐ Yes
	Number Street		Number Street		Lies
	City Stat	e Zip Code	City State Zi	o Code	
22. Hav	•		ace other than your home within	1 year before you filed for bankruptcy	ı?
<b>✓</b>	No Yes. Fill in the details.		·		
			Who else had access to it?	Describe the contents	Do you still have it?
	Name of Storage Fac	ility	Name		☐ No ☐ Yes
	Number Street		Number Street		L les
	City Stat	e Zip Code	City State Zi	o Code	

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		Last Name			
	First Name Middle Name				
t 9:	Identify Property You Hold or Con	trol for Someone Else			
Do	you hold or control any property that some	eone else owns? Include any	property you b	orrowed from, are storing for, or hold in	n trust for
son	neone.				
<b>✓</b>	No				
	Yes. Fill in the details.				
		Where is the property?		Describe the contents	Value
	Owner's Name	Number Street			
	Number Street	<del>-</del>			
		City State	Zip Code		
	City State Zip Code	_			
10:	Give Details About Environmenta	il Information			
the p	ourpose of Part 10, the following definitions app	ly:			
■ E	Environmental law means any federal, state, or	local statute or regulation conce	rning pollution, c	contamination, releases of	
	nazardous or toxic substances, wastes, or mate				
11	ncluding statutes or regulations controlling the	cleanup of these substances, wa	astes, or materia	āl.	
	Site means any location, facility, or property as d	•	aw, whether you	now own, operate, or utilize it	
O	or used to own, operate, or utilize it, including d	isposal sites.			
	Hazardous material means anything an environr		s waste, hazard	ous substance,	
to	oxic substance, hazardous material, pollutant, o	contaminant, or similar term.			
port a	all notices, releases, and proceedings that you k	know about, regardless of when t	hey occurred.		
Has					
	s any governmental unit notified you that y	ou may be liable or potentially	y liable under o	or in violation of an environmental law?	
<b>✓</b>	No	ou may be liable or potentiall	y liable under d	or in violation of an environmental law?	
<b>✓</b>		ou may be liable or potentiall	y liable under o		
<b>✓</b>	No	ou may be liable or potentially  Governmental unit	y liable under d	or in violation of an environmental law?  Environmental law, if you know it	Date of
	No		y liable under d		
	No		y liable under o		Date of
	No Yes. Fill in the details.  Name of site	Governmental unit	y liable under o		Date of
	No Yes. Fill in the details.	Governmental unit	y liable under d		Date of
	No Yes. Fill in the details.  Name of site	Governmental unit  Governmental unit  Number Street			Date of
	No Yes. Fill in the details.  Name of site  Number Street	Governmental unit	y liable under o		Date of
▼	No Yes. Fill in the details.  Name of site	Governmental unit  Governmental unit  Number Street			Date of
	No Yes. Fill in the details.  Name of site  Number Street	Governmental unit  Governmental unit  Number Street  City State	Zip Code		Date of
	No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ve you notified any governmental unit of an	Governmental unit  Governmental unit  Number Street  City State	Zip Code		Date of
	No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code we you notified any governmental unit of an	Governmental unit  Governmental unit  Number Street  City State	Zip Code		Date of
	No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ve you notified any governmental unit of an	Governmental unit  Governmental unit  Number Street  City State  ny release of hazardous mater	Zip Code	Environmental law, if you know it	Date of notice
	No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code we you notified any governmental unit of an	Governmental unit  Governmental unit  Number Street  City State	Zip Code		Date of
	No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code we you notified any governmental unit of an	Governmental unit  Governmental unit  Number Street  City State  ny release of hazardous mater	Zip Code	Environmental law, if you know it	Date of notice
	No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code we you notified any governmental unit of an	Governmental unit  Governmental unit  Number Street  City State  ny release of hazardous mater	Zip Code	Environmental law, if you know it	Date of notice
	No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ve you notified any governmental unit of an No Yes. Fill in the details.  Name of site	Governmental unit  Governmental unit  Number Street  City State  The state of hazardous mater of the state	Zip Code	Environmental law, if you know it	Date of notice
	No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ve you notified any governmental unit of an No Yes. Fill in the details.	Governmental unit  Governmental unit  Number Street  City State  The property of the state of th	Zip Code	Environmental law, if you know it	Date of notice
	No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ve you notified any governmental unit of an No Yes. Fill in the details.  Name of site	Governmental unit  Governmental unit  Number Street  City State  Overnmental unit  Governmental unit  Governmental unit  Number Street	Zip Code	Environmental law, if you know it	Date of notice
	No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ve you notified any governmental unit of an No Yes. Fill in the details.  Name of site	Governmental unit  Governmental unit  Number Street  City State  Overnmental unit  Governmental unit  Governmental unit  Number Street	Zip Code	Environmental law, if you know it	Date of notice

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Deb	tor 1	Miranda		N.	Slotowski	Case	number (if known)	
		First Name		Middle Name	Last Name			
26.	Hav	e vou been a narty	in any judio	ial or administ	rative proceeding under :	any environment	al law? Include settlements and order	s.
20.	ı ıav	e you been a party	in any judic	iai or administ	rative proceeding under	any environment	ariaw: include settlements and order	<b>J.</b>
	$\overline{\mathbf{V}}$	No						
		Yes. Fill in the deta	ils.					
					Court or agency		Nature of the case	Status of the
								case
		Case title						Dan dia a
					Court Name			Pending
		_			Courtivaine			On appeal
		Case number			Number Street			
								Concluded
					City State	Zip Code		
		1						
Part	11:	Give Details A	bout Your	Business o	r Connections to An	y Business		
07	18/:41	-i 4	6:1	h	d b	h		.0
27.	vviti	nin 4 years before	you filed for	bankruptcy, die	a you own a business or	nave any of the f	ollowing connections to any business	5 <i>f</i>
		A sole propriet	or or self-emp	oloyed in a trade	, profession, or other activit	y, either full-time o	r part-time	
				-	C) or limited liability partners		•	
		A partner in a		.,	,			
				ging executive o	f a cornoration			
					ity securities of a corporatio	<b></b>		
		An owner or at	least 5% of the	ne voting or equi	ity securities of a corporatio	n		
	<b>✓</b>	No. None of the abo	ove applies. G	io to Part 12.				
	П	Yes. Check all that a	apply above a	and fill in the deta	ils below for each business			
					Describe the natu		ss Employer Identification n	umber Do not
					20001110 1110 11110		include Social Security no	
							EIN:	
		Business Name			_		LIIN.	
		Number Street					Dates business existed	
					Name of account	ant or bookkeepe	er	
		City	State	Zip Code			From To	
					Describe the net	us of the business		umber De net
					Describe the natu	ire of the busines	Employer Identification n include Social Security no	
								amber of fine.
		Business Name					EIN:	
		Number Street					Dates business existed	
					Name of accounts	ant or bookkeepe	er	
		City	State	Zip Code			From To	
		City	Siale	Zip Code				
					Describe the natu	ire of the busines		
							include Social Security nu	umber or ITIN.
					<u> </u>		EIN:	
		Business Name						
		-					Dates business existed	
		Number Street			Name of account	ant or bookkeene		
						or booknoope		
		City	State	Zip Code			From To	<del></del>

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Debto	or 1 <u>Miranda</u>		N.	Slotowski	Case number (if known)
	First Name		Middle Name	Last Name	
	•	rs before you filed to ther parties.	or bankruptcy, did y	ou give a financial statemer	nt to anyone about your business? Include all financial institutions,
į		n the details below.			
				Date issued	
	Name			MM/DD/YYYY	
				<u> </u>	
	Numbe	r Street			
	City	State	Zip Code	<u> </u>	
Part 1	12: Sign I				
	ankruptcy c		es up to \$250,000, or		y, or obtaining money or property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		Signature of Debi			Signature of Debtor 2
		Date 9/28/2016			Date
Di V	id you attac No Yes	h additional pages	o Your Statement o	f Financial Affairs for Indivi	duals Filing for Bankruptcy (Official Form 107)?
Di	id you pay o	r agree to pay some	eone who is not an a	ttorney to help you fill out b	ankruptcy forms?
<u> </u>	No				An 14 B 1 4 B 20 B 1 A 1 A
L	Yes. Nam	e of person			Attach the Bankruptcy Petition Preparer's Notice,

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Fill in this information to identify your case:					
Debtor 1	Miranda	N.	Slotowski		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filir	ng) First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	Northern	District of Illinois		
Case number (If known)			(State)		

Check if this	is	а
amended	fili	in

#### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that Did you claim the property as exempt on Schedule C? secures a debt? Surrender the property. No. Creditor's name: BRIDGECREST CREDIT Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: 067 Automobile Retain the property and [explain]: No. Surrender the property. Creditor's name: Honor Finance Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: 036 Automobile Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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Debtor	Miranda	N.	Slotowski	Case number (if	
1	First Name	Middle Name	Last Name	known)	
iot Vou	u Unavaired Darsanal Dr	amarty I acces		Part 2:	
	r Unexpired Personal Property le		Shedule G: Executory Cont	ntracts and Unexpired Leases (Official Form 106G), fill in the	_
informa	tion below. Do not list real esta	te leases. Unexpired lea	ses are leases that are still	Il in effect; the lease period has not yet ended. You may assume	
an unex	pired personal property lease i	if the trustee does not as	ssume it. 11 U.S.C. § 365(p	5)(2).	
Des	cribe your unexpired personal	property leases		Will the lease be assumed?	
Les	sor's name:			No Yes	
	cription of leased erty:				
Les	sor's name:			No Yes	
	cription of leased erty:				
Les	sor's name:			No Yes	
	cription of leased perty:				
Les	sor's name:			No Yes	
	cription of leased erty:				
Les	sor's name:			No Yes	
	cription of leased erty:				
Les	sor's name:			No Yes	
	cription of leased perty:				
Les	sor's name:			No Yes	
	cription of leased perty:				
Part 3:	Sign Below				_
Unde			ntention about any propert	rty of my estate that secures a debt and any personal	_
<b>~</b> /	s/ Miranda Slotowski		×		
	gnature of Debtor 1			e of Debtor 1	
	ate <b>9/28/2016</b>		Date		
ים	MM/DD/YYYY			IM/DD/YYYY	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A–2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

+		administrative fee
+		administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

## Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

#### CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1250.00 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 1. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

Initial:

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the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 9/28/16	
client MSlotavale	Client
Attorney Muth	

Miranda Slotowski Matter Number 491075-001 Initial: MS

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B 203 (12/94)

#### **UNITED STATES BANKRUPTCY COURT**

	Norther	n District of Illinois	
n re	Miranda N. Slotowski	Case No.	
_	Debtor		(If known)
		Chapter	Chapter 7
	DISCLOSURE OF COMPENS	SATION OF ATTORNEY FO	R DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2 that compensation paid to me within one year before services rendered or to be rendered on behalf of the is as follows:	e the filing of the petition in bankruptcy, or ag	reed to be paid to me, for
	For legal services, I have agreed to accept		\$1,250.0
	Prior to the filing of this statement I have received		\$0.0
	Balance Due		\$1,250.0
2.	The source of the compensation paid to me was:		
	<b>✓</b> Debtor Othe	er (specify)	
3.	The source of the compensation paid to me is:		
	<b>✓</b> Debtor Othe	er (specify)	
4.	I have not agreed to share the above-disclosed members and associates of my law firm.	compensation with any other person unless t	they are
	I have agreed to share the above-disclosed commembers or associates of my law firm. A copy the people sharing in the compensation, is attack	of the agreement, together with a list of the	
5.	In return for the above-disclosed fee, I have agreed a. Analysis of the debtor's financial situation, an bankruptcy;	- · · · · · · · · · · · · · · · · · · ·	
	b. Preparation and filing of any petition, schedu	les, statements of affairs and plan which mag	y be required;
	c. Representation of the debtor at the meeting of	of creditors and confirmation hearing, and any	y adjourned hearings thereof;
6.	By agreement with the debtor(s), the above-disclose	ed fee does not include the following services	:
	(	CERTIFICATION	
	I certify that the foregoing is a complete statement of he debtor(s) in this bankruptcy proceedings.	any agreement or arrangement for payment	to me for representation
	9/28/2016	/s/ Nathan Delman	
	Date	Signature of Attorney	
		Semrad Law Firm	
		Name of law firm	

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Slotowski, Miranda N.	Case No		
_	Debtor(s)	Case IVI.		
		Chapter.	Chapter7	
	VERIFICATION	OF CREDITOR MAT	RIX	
	The above named Debtors hereby verify that the a	ttached list of creditors is true	e and correct to the best of their	knowledge
Date:	9/28/2016	/s/ Slotowski, M	randa N.	
	0.20.20.10	Slotowski, Mirai Signature of De	nda N.	

BRIDGECREST CREDIT 4020 E INDIAN SCHOOL RD PHOENIX , AZ 85018 USA

Honor Finance PO Box 1817 Evanston , IL 60204 USA

COMMONWEALTH FINANCIAL 245 Main St Scranton , PA 18519 USA

CAPITAL ONE BANK USA N PO Box 71083 c/o Ashley Boswell Charlotte , NC 28272 USA

Capital One PO Box 71083 POC Notice: Amanda Matchett Charlotte , NC 28272 USA

ARMOR SYSTEMS CO 1700 KIEFER DR STE 1 ZION , IL 60099 USA

SW CRDT SYS 2629 DICKERSON PK CARROLLTON , TX 75007 USA

I C SYSTEM INC 444 Hwy 96 E Saint Paul , MN 55127 USA

Everest College Bedford Park 7414 South Cicero Avenue Chicago , IL 60629 USA

Plain Green 93 Mack Road, Suite 600 Box Elder , MT 59521 USA

Colonial Park Apartments 748 Sharon Ave Park City , IL 60085 USA

Comcast 11621 E. Marginal Way # 5 Case 16-30832 Doc 1 Filed 09/28/16 Entered 09/28/16 11:55:13 Desc Main Document Page 63 of 70

Bankruptcy Dept Seattle , WA 98168 USA Illinois Tollway PO Box 5544 Chicago , IL 60680 USA

Sprint P.O. Box 219554 Kansas City , MO 64121 USA

US Cellular Dept 0205 Palatine , IL 60055 USA

Aarons Furniture 6707 Londonderry Way Union City , GA 30291 USA

Bank of America Po Box 26078 Greensboro , NC 27420 USA

David J Axelrod & Associates 1448 Old Skokie Valley Rd Highland Park , IL 60035 USA Case 16-30832 Doc 1 Filed 09/28/16 Entered 09/28/16 11:55:13 Desc Main Document Page 65 of 70

Debtor 1 Miranda		Slotowski Case number (	if known)
First Name Part 6: Answer These Qu	uestions for Reporting Purpor		
16. What kind of debts do you have?	16a. Are your debts primarile 101(8) as "incurred by an No. Go to line 16b. Yes. Go to line 17.  16b. Are your debts primarile obtain money for a busin investment. No. Go to line 16c. Yes. Go to line 17.	y consumer debts? Consumer dentification individual primarily for a personal sy business debts? Business debts or investment or through the ou owe that are not consumer de	al, family, or household purpose."  bits are debts that you incurred to operation of the business or
17. Are you filing under	No. I am not filing under Chapte	er 7. Go to line 18.	
Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	paid that funds will be availa  No. Yes.	able to distribute to unsecured creditors?	perty is excluded and administrative expenses are
18. How many creditors do you estimate that you owe?	☑ 1-49 □ 50-99 □ 100-199 □ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	✓ \$0-\$50,000  ☐ \$50,001-\$100,000  ☐ \$100,001-\$500,000  ☐ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	
20. How much do you estimate your liabilities to be?	✓ \$0-\$50,000  ☐ \$50,001-\$100,000  ☐ \$100,001-\$500,000  ☐ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	
Part 7: Sign Below	• t		
For you	and correct.  If I have chosen to file under to 11,12, or 13 of title 11, United choose to proceed under Chap If no attorney represents me a me fill out this document, I had I request relief in accordance I understand making a false st	Chapter 7, I am aware that I may States Code. I understand the relepter 7.  and I did not pay or agree to pay by e obtained and read the notice rewith the chapter of title 11, United tatement, concealing property, or case can result in fines up to \$25 52, 1341, 1519, and 3571.	proceed, if eligible, under Chapter 7, lief available under each chapter, and I someone who is not an attorney to help equired by 11 U.S.C. § 342(b). I States Code, specified in this petition. obtaining money or property by fraud in 0,000, or imprisonment for up to 20
	Executed on 9/28/2016 MM / DD		cuted on

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Fill in this info	ormation to identify your cas	e:			
Debtor 1	Miranda	N.	Slotowski		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if III	ing) First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	Northern	District of Illinois		
Gh-	_		(State)		
Case number (If known)	r				
Official	Form 106De	ec			Check if this is an amended filing
Declar	ation About a	n Individual De	ebtor's Sch	edules	12/1:
If two marrie	d people are filing togeth	er, both are equally respons	ible for supplying cor	rect information.	
Part 1: Sig	ı pay or agree to pay som	eone who is NOT an attorne	y to help you fill out b	ankruptcy forms?	
Yes	. Name of person		Attach Bankrupt Signature (Offici	cy Petition Preparer's Notice, D al Form 119).	eclaration, and
that the	ey are true and correct.	re that I have read the summ	*	ed with this declaration and	
Date 9/			Date	:	
_	IM/DD/YYYY		rate.	MM/DD/YYYY	

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Debtor	1 Miranda	N.	Slotowski	Case number	(if known)
	First Name	Middle Name	Last Name		
	Vithin 2 years before you filed reditors, or other parties.	l for bankruptcy, did y	ou give a financial stateme	nt to anyone about	your business? Include all financial institutions,
[	No Yes. Fill in the details below.				
_	_		Date issued	P	
	Name	······································	MM/DD/YYYY	•	
	Number Street		••••	:	
	City State	Zip Code			
Part 12	2: Sign Below				
tru	e and correct. I understand t	hat making a false sta nes up to \$250,000, or	itement, concealing propei	ty, or obtaining mon	nder penalty of perjury that the answers are ley or property by fraud in connection with a S.C. §§ 152, 1341, 1519, and 3571.
	Signature of De			Signature of D	ebtor 2
	Date 9/28/201	6		Date	
Die	d you attach additional page:	s to Your Statement o	f Financial Affairs for Indiv	iduals Filing for Bar	kruptcy (Official Form 107)?
	No Yes				
Die	d you pay or agree to pay sor	neone who is not an a	ttorney to help you fill out	pankruptcy forms?	
v	No				
Ē	Yes. Name of person				ankruptcy Petition Preparer's Notice, and Signature (Official Form 119).

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Document Page 68 of 70 Slotowski Case number (if Debtor Miranda Last Name known) Middle Name First Name Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Will the lease be assumed? Describe your unexpired personal property leases No No Lessor's name: Description of leased property: No Lessor's name: Yes Description of leased property: Lessor's name: Description of leased property: No Lessor's name: Description of leased property: Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

/s/ Miranda Slotowski

Signature of Debtor 1

Date 9/28/2016 MM/DD/YYYY Date MM/DD/YYYY Case 16-30832 Doc 1 Filed 09/28/16 Entered 09/28/16 11:55:13 Desc Main Document Page 69 of 70

### UNITED STATES BANKRUPTCY COURT Northern District of Illinois

In re:	Słotowski, Miranda N.	Case No	
<del></del>	Debtor(s)		
		Chapter.	Chapter7
	VERIFIC	ATION OF CREDITOR MATRIX	ζ
	The above named Debtors hereby verify the	hat the attached list of creditors is true and	correct to the best of their knowledge
Date:	9/28/2016	/s/ Slotowski, Miranda	n. MS16Wer
	***************************************	Slotowski, Miranda N. Signature of Debtor	

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Debtor 1	Miranda	N,	Slotowski	Case number (	(if known)		
	First Name	Middle Name	Last Name	Column A Debtor 1	Deb	mn B tor 2 or -filing spouse	
Do no		if you contend that the amount	received was a benefit under	\$0.00			
	locial Security Act. I	nstead, list it here:	÷ 00				
For y	ou our spouse		\$0.00 \$0.00				
9.Pens		income. Do not include any a	<del></del>	\$ <u>0.00</u>			
10. <b>Inco</b> amou paym intern	ome from all other int. Do not include a nents received as a	sources not listed above. Sny benefits received under the victim of a war crime, a crime atterorism. If necessary, list of	Social Security Act or against humanity, or				
Othe	r Government Assis	tance		\$280,00			
Total	amounts from sepa	rate pages, if any.		+\$0.00	+		
11. Cal	culate your total c	urrent monthly income. Additional for Column A to the total	d lines 2 through 10 for each for Column B.	\$3,936.42	+		\$3,936.42
							Total current monthly income
Part 2:	Determine Wh	ether the Means Test	Applies to You	:			<u> </u>
12. Calc	ulate your current	monthly income for the year	ar. Follow these steps:				
12a.	Copy your total curre	ent monthly income from line 1	1.	i	Copy line 11 h	nere →	\$3,936.42
	Multiply by 12 (the	number of months in a year).					X 12
12b.	The result is your ar	nnual income for this part of th	e form.			12b.	\$47,237.04
13 Calcı	ulate the median fo	amily income that applies to		;			
Fill in	the state in which y	ou live.	Illinois				
Fill in	the number of peop	ole in your household.	2				
	i the median family i ehold.	ncome for your state and size	of			13.	\$63,896.00
instru	nd a list of applicable actions for this form.  do the lines comp	e median income amounts, go This list may also be available	online using the link specified at the bankruptcy clerk's office	d in the separate ce.			
14a.		than or equal to line 13. On the	ne top of page 1, check box 1,	There is no presumption of	fabuse.		
14b.	Line 12b is mor	e than line 13. On the top of paddill out Form 122A-2.	age 1, check box 2, The presu	imption of abuse is determin	ned by Form 12	2A-2.	
Part 3:	Sign Below						,
Bys	signing here, I decla	re under penalty of perjury tha	t the information on this state	ment and in any attachment	ts is true and co	orrect.	
×	/s/ Miranda Sloto	wski MSDtall	u 🗴	<b>.</b>			···
•	Signature of Debtor	1		Signature of Debtor 2			
i	Date <u>9/28/2016</u> MM/DD/YYY	<del>-</del>		Date 9/28/2016 MM/DD/YYYY			
	•	la, do NOT fill out or file Form lb, fill out Form 122A-2 and file					